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SERIAL NUMBER 10/743,357	FILING OR 371(c) DATE 12/22/2003 RULE	CLASS 604 422/45	GROUP ART UNIT 3761	ATTORNEY DOCKET NO. P-11209.05
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## APPLICANTS

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*[Handwritten signature]*

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/440,005 01/14/2003 and claims benefit of 60/515,619 10/30/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*[Handwritten signature]*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

04/01/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 24	TOTAL CLAIMS <i>AP 38</i>	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Handwritten signature]</i>	Examiner's Signature	Initials		

## ADDRESS

27581

## TITLE

Extracorporeal blood circuit priming system and method

FILING FEE RECEIVED 1278	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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